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**Art Unit: 2611**

**Fax: (571) 273-8300**

**From : Winston Hsu, Registration No. 41,526**

**Serial No.: 10/709,004**

**Attorney Docket No.: VOSP0002USA**

**Subject: Information Disclosure Statement (IDS)**

**Total Pages: 4 pages (including cover page)**

**Winston Hsu AUG. 29 2006**

**VOSP0002USA0\_D1\_3**

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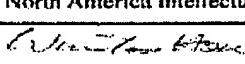
PTO/SB/21 (07-06)

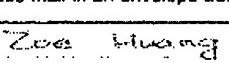
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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>		Application Number 10/709,004  Filing Date 04/07/2004  First Named Inventor Yuan-Kun Hsiao  Art Unit 2611  Examiner Name PATEL JAYANTI K
Total Number of Pages in This Submission 3		Attorney Docket Number VOSP0002USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Firm Name	North America Intellectual Property Corporation
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<small>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		<b>Complete If Known</b>	
<b>Fee TRANSMITTAL For FY 2005</b>		Application Number	10/709,004
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	04/07/2004
<b>TOTAL AMOUNT OF PAYMENT (\$)</b>		First Named Inventor	Yuan-Kun Hsiao
(\$ 0.00)		Examiner Name	PATEL JAYANTI K
		Art Unit	2611
		Attorney Docket No.	VOSPO002USA

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<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																																																													
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)																																																													
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<b>FEES CALCULATION</b>																																																													
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																																																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 25%;">Application Type</th> <th colspan="2" style="width: 25%;">FILING FEES</th> <th colspan="2" style="width: 25%;">SEARCH FEES</th> <th colspan="2" style="width: 25%;">EXAMINATION FEES</th> <th rowspan="2" style="width: 10%; text-align: right;">Fees Paid (\$)</th> </tr> <tr> <th style="width: 12.5%;">Small Entity</th> <th style="width: 12.5%;">Fee (\$)</th> <th style="width: 12.5%;">Small Entity</th> <th style="width: 12.5%;">Fee (\$)</th> <th style="width: 12.5%;">Small Entity</th> <th style="width: 12.5%;">Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td>_____</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td>_____</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td>_____</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td>_____</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>_____</td> </tr> </tbody> </table>								Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Utility	300	150	500	250	200	100	_____	Design	200	100	100	50	130	65	_____	Plant	200	100	300	150	160	80	_____	Reissue	300	150	500	250	600	300	_____	Provisional	200	100	0	0	0	0	_____
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Reissue	300	150	500	250	600	300	_____																																																						
Provisional	200	100	0	0	0	0	_____																																																						
<b>2. EXCESS CLAIM FEES</b>																																																													
<b>Fee Description</b>																																																													
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Each independent claim over 3 (including Reissues)																																																													
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HP = highest number of independent claims paid for, if greater than 3.																																																													
<b>3. APPLICATION SIZE FEE</b>																																																													
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																																													
Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)																																																													
- 100 =      / 50      (round up to a whole number)      X      =																																																													
<b>4. OTHER FEE(S)</b>																																																													
Non-English Specification. \$130 fee (no small entity discount)																																																													
Other (e.g., late filing surcharge):																																																													

<b>SUBMITTED BY</b>	
Signature	_____ Winston Hsu
Name (Print/Type)	Registration No. (Attorney/Agent) 41,526
	Telephone 3027291562
	Date AUG. 29 2006

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Substitute for form 1449A/PTO

Application Number	10/709,004
Filing Date	04/07/2004
First Named Inventor	Yuan-Kun Hsiao
Art Unit	2611
Examiner Name	PATEL, JAYANTI K
Attorney Docket Number	VOSP0002USA

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## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

*Use as many words as necessary.*

U.S. PATENT DOCUMENTS

**FOREIGN PATENT DOCUMENTS**

Examiner Signature		Date Considered	
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**\*EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 801.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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